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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 09/831805	FILING DATE			
						APPLICANT(S)				
						CLAIMS				
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51			
2	1						52			
3	1						53			
4	1						54			
5							55			
6	1						56			
7	1						57			
8	1						58			
9	1						59			
10	1						60			
11	1						61			
12	1						62			
13	1						63			
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15	1						65			
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18	1						68			
19	1						69			
20	1						70			
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40							90			
41							91			
42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL I.D.	2						TOTAL IND.			
TOTAL DEP.	18						TOTAL DEP.			
TOTAL CLAIMS	20						TOTAL CLAIMS			

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS R AMENDMENTS

U.S. DEPARTMENT OF COMMERCE
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